FORM D



FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION RECEIVED
Washington, D.C. 20549

JUL 2 1 2003

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden bours per response ... 16.00

OMB APPROVAL

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PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

NOTICE OF SALE OF SECURITIES

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an a Common Stock Offering	amendment and name has changed, and in	idicate change.)			
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Rule	506 ☐ Sec	tion 4(6)	ULOE		
	Amendment					
	A. BASIC IDEN	TIFICATION	DATA			ar Ejlydd
1. Enter the information requested about	it the issuer					
Name of Issuer (check if this is an an	nendment and name has changed, and ind	icate change.)				
TriGeo Network Security, Inc.						
Address of Executive Offices	(Number and Street, C	ity, State, Zip (Code)	Telephone Number	r (Including Area	Code)
510 Clearwater Loop, Ste. 203, Post Fall	`	· · · · · · · · · · · · · · · · · · ·		(208) 664-7000	<u></u>	
Address of Principal Business Operations	(Number and Street, C	ity, State, Zip (Code)	Telephone Numbe	r (Including Area	Code)
(if different from Executive Offices)						-15
				<u> </u>		-ECCED
Brief Description of Business					no(C	K L JAPP
Computer Network Security					PHE	CESSE 23 2003
Type of Business Organization	—				/	23 2003
□ corporation	☐ limited partnership, already formed		∐ othe	r (please specify):	(1)0'	L 20 -
business trust	☐ limited partnership, to be formed					MOSBACH
		Month	Year		1	THOMSON FINANCIAL
Actual or Estimated Date of Incorporation	•	6	97	🔀 Actual	Estimated	P.W. a. a.
Jurisdiction of Incorporation or Organization	`					
	CN for Canada; FN for other forei	gn jurisdiction)	ID		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Cach general and h	ialiaging partite of	partifership issuers.						
Check Box(es) that Apply:	Promoter	Beneficial Owner	\boxtimes	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if Michelle L. Dickman (and M		use and beneficial owne	 er)			······································		
Business or Residence Addres								
510 Clearwater Loop, Suite			-)					•
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	X	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)							
Geoffrey Rinehart	indi (iddai)							
Business or Residence Addres	s (Number and St	reet City State Zin Cod	e)					
510 Clearwater Loop, Suite			-)					
Check Box(es) that Apply:	Promoter	Beneficial Owner	$\neg \neg$	Executive Officer	Ø	Director	П	General and/or Managing Partner
				2		2	_	o one or an analysis of an anor
Full Name (Last name first, if	individual)						-	
Craig Tedmon, ScD								
Business or Residence Addres	s (Number and St	reet, City, State, Zip Cod	e)					
10476 Lakeview Road, Hayd	en, Idaho 83835				-			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner		Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first, if								
Big Horn Ventures (Thomas		and City State 7: C-1		· · · · · · · · · · · · · · · · · · ·				
Business or Residence Addres 4752 W. Riverbend Avenue,			<i>z)</i>					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer	Ø	Director	$\neg \neg$	General and/or Managing Partner
check Box(es) that ripply.	romoter	Denencial Owner		Excounte Officer	23	Director		General and of Managing Farmer
Full Name (Last name first, if	individual)				-			
Stephen Meyer								
Business or Residence Addres	s (Number and St	reet, City, State, Zip Cod	e)					
10500 Hayden Bluff Lane, H	layden Lake, Idaho							
Check Box(es) that Apply:	Promoter	■ Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)							
John Shovic	, <u> </u>							
Business or Residence Address		reet, City, State, Zip Cod	e)	-				
912 Sierra Nevada Rd., War								
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	· 📙	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if Ben R. Rolphe	individual)							
Business or Residence Address	s (Number and Str	reet City State Zin Cod	e)			·····		
12908 N. Strahorn, Hayden I		reet, etty, blate, zip cou	-)					
Check Box(es) that Apply:	Promoter	Beneficial Owner	П	Executive Officer		Director		General and/or Managing Partner
	-							
Full Name (Last name first, if WT Richards	individual)					-		
Business or Residence Address	s (Number and Str	reet, City, State, Zip Cod-	e)					
8836 N. Hess, Suite D, Hayde	n Lake, Idaho 838	35						
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)							<u> </u>
Business or Residence Address	s (Number and Str	reet, City, State, Zip Code						
	,	, <u>, , , , , , , , , , , , , , , , , , </u>						
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)		_					
Business or Residence Address	s (Number and Str	reet, City, State, Zip Code	e)					
	(Use 1	blank sheet, or copy and	use addi	tional copies of this sl	heet, a	s necessary.))	

		THE STREET		B. .	INFOR	MATION	ABOUT (FFERIN	G				
1.	Has the issue	r sold, or do	es the issuer	intend to se	ell, to non-ac	credited in	vestors in th	is offering?				Yes □	No 🛛
							f filing unde					_	_
2.	What is the mi	nimum invest	ment that will	be accepted	from any indi	vidual?						N/A	
	TD 11 CC 1	*. * *										Yes	No
3.	Does the offeri											×	
4.	Enter the inforcommission or												
	offering. If a sand/or with a s	person to be	listed is an as	sociated pers	on or agent o	f a broker or	dealer regist	ered with the	SEC				
	associated pers	ons of such a	broker or dea										ij
Full l	Name (Last na	me first, if i	ndividual)										
	ness or Reside	nce Address	(Number an	d Street, Ci	ty, State, Zi	p Code)							
Nam	e of Associate	d Broker or	Dealer		-						· · · · · ·		
State	s in Which Per	son Listed l	Has Solicited	or Intends	to Solicit Pu	ırchasers							
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												☐ All States	
	(Check All St	ates or chec.	k individual Si							••••••••	·········· ⊔	An State	s
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MC	
[MT]	NĒ]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	<u>.</u>
[RI] Full l	[SC] Name (Last na	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
							<u>,, </u>			,			
Busin	ness or Residen	nce Address	(Number an	d Street, Ci	ty, State, Zi	p Code)							
Nam	e of Associated	d Broker or	Dealer								***************************************		
State	s in Which Per	son Listed l	Has Solicited	or Intends	to Solicit Pu	ırchasers							
	(Check "All St	ates" or checl	k individual St	tates)			• • • • • • • • • • • • • • • • • • • •					All Stat	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[НП]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC)]
[MT] _[RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] _[VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full l	Name (Last na	me first, if i	ndividual)								,		
Busin	ness or Resider	nce Address	(Number an	d Street, Ci	ty, State, Zi	p Code)	· <u> </u>						
Name	e of Associated	Broker or	Dealer									 	
State	s in Which Per	son Listed I	Has Solicited	or Intends	to Solicit Pu	ırchasers	· · · · · · · · · · · · · · · · · · ·		•				
	(Check "All St	ates" or checl	k individual St	ates)		***************************************			•••••			All Stat	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[КҮ] [NJ]	[LA] ·[NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MC [PA]	-
וואון ,	isci	ומסו	[TN]	[TX]	נו וידיו	IVTI	ΓνΔί	[WA]	เพงา	เพที	iwvi	[PR]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities	<u> </u>	
	offered for exchange and already exchanged.		4.6
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$0
	Equity	\$ <u>1,500,000</u>	\$ <u>1,326,000</u>
	☑ Common ☐ Preferred		
	Convertible Securities (some investors did receive warrants for no additional consideration.	\$0	\$0
Wai	rants were granted with fair market value strike price.)		
	Partnership Interests	\$0	\$0
	Other (Specify Unit)	\$	\$0
	Total	\$0	\$0
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	N. J	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	8	\$_1,326,000
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	-	
	Time of officing	Type of	Dollar Amount Sold
	Type of offering	Security	Solu
	Rule 505		\$
	Regulation A		\$
	Rule 504.	-	\$ \$
	Total		\$ \$
	100		<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		□\$ <u> </u>
	Printing and Engraving Costs		□\$ <u> </u>
	Legal Fees		⊠ \$ <u>10,000</u>
	Accounting Fees		□\$ <u>0</u>
	Engineering Fees		□\$ <u> </u>
:	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify)		\$ 0
	m . 1		5

	the aggregate offering price given in response to Part C - nished in response to Part C - Question 4.a. This difference the issuer."		\$ 1,316,000
used for each of the purposes sho estimate and check the box to the	adjusted gross proceeds to the issuer used or proposed to be wn. If the amount for any purpose is not known, furnish an eleft of the estimate. The total of the payments listed must to the issuer set forth in response to Part C - Question 4.b.		
		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		□\$	□\$
Purchase of real estate		□\$	
Purchase, rental or leasing and ins and equipment	tallation of machinery	□\$	
Construction or leasing of plant by	uildings and facilities	□\$	 \$
offering that may be used in ex-	change for the assets or securities of another	□\$	□\$
Repayment of indebtedness		□\$	□\$
Working capital		□\$	⊠ \$ <u>1,316,000</u>
Other (specify):			
		□\$	□\$
		□\$	□\$
Column Totals		□\$	□\$
Total Payments Listed (column to	tals added)	⊠ \$ <u>1</u>	,316,000
	D FEDERAL SIGNATURE		
mature constitutes an undertaking by	be signed by the undersigned duly authorized person. If this not he issuer to furnish to the U.S. Securities and Exchange Commis by non-accredited investor pursuant to paragraph (b)(2) of Rule 5	ssion, upon written requ	est of its staff, the
uer (Print or Type)	Signature Da	te	
Geo Network Security, Inc.	Mululus -	7/10/03	
me of Signer (Print or Type)	Title of Signer (Print or Type)	·	· · · · · · · · · · · · · · · · · · ·
ichelle L. Dickman	President and CEO		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.252 presently subject to any of the disqualification Yes No provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	ssuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned authorized person.
Issu	r (Print or Type) Signature Date
	eo Network Security, Inc. e of Signer (Print or Type) Title of Signer (Print or Type)

President and CEO

Instruction:

Michelle L. Dickman

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell offering price Type of investor and to non-accredited explanation of offered in state amount purchased in State waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No ALΑK AZARCA CO CTDE DC FLGA НІ ID Common Stock 7 \$1,295,000 (and Warrants to one investor at no additional consideration) / \$1,500,000 IL IN IΑ KS KY LA ME MD MA MI .MN

4/		- 3 4545511 1923	(alma Makabbaja ya 1		APP	ENDIX				
	1	to non-a investor	to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disquali under Sta (if yes, explana waiver g	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
	State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
	MS									
	MO									
	MT									
	NE									
	NV									
	NH									
	NJ									
,	NM									
	NY									
	NC									
	ND									
	ОН			·						
	OK									
	OR					-				
	PA							·		
	RI									
	SC									
	SD									
	TN									,
	TX									
	UT									
	VT									
	VA									
	WA		√	Common Stock / \$1,500,000	1	\$31,000				٧.
	WV									
	WI									

1	Intend	2	Type of security and aggregate	•					
	to non-a	ccredited s in State -Item 1)	offering price offered in state (Part C-Item 1)		(if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR			-						

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